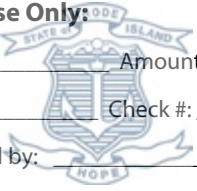


**For Official Use Only:**

Date: \_\_\_\_\_ Amount: \_\_\_\_\_

Receipt #: \_\_\_\_\_ Check #: \_\_\_\_\_

Permit approved by: \_\_\_\_\_



RI Department of Labor and Training  
 Workforce Regulation and Safety Division  
**Occupational Safety - Boiler Unit**  
 1511 Pontiac Avenue, P.O. Box 20157,  
 Cranston, RI 02920-0942  
**Telephone:** (401)462-8570 opt.#1  
**Email:** jose.taveras@dlt.ri.gov Chief Boiler  
 and Pressure Vessel Inspector  
**Fax:** (401) 462-8576  
 www.dlt.ri.gov/wrs/occupationsafety/

Permit #: \_\_\_\_\_

**APPLICATION FOR PERMIT TO  
 INSTALL BOILERS/PRESSURE  
 VESSELS**

To be completed by installer **prior** to boiler installation, then forward to the above address accompanied by a copy of the boiler/pressure vessel ASME plate and/or Manufacturer's Data label and installation fee. **High pressure boilers are \$300 per unit; Low pressure boilers are \$120 per unit.**

**Please make checks payable to: RI Dept. of Labor and Training Boiler Unit.**

Do you need this application in a language other than English?  Yes  No If yes, what language? \_\_\_\_\_

User and Facility Information

Installer Information

1. Owner/User: \_\_\_\_\_

Installer: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Tel. No.: \_\_\_\_\_

Tel. No.: \_\_\_\_\_

Location Business Name: \_\_\_\_\_

Approx. Installation Date: \_\_\_\_\_

2. Boiler/Pressure Vessel Manufactured By: \_\_\_\_\_ New  Used  Year Manufactured: \_\_\_\_\_

National Board #: \_\_\_\_\_ Manufacturer's Serial #: \_\_\_\_\_ Maximum Allowable Working Pressure: \_\_\_\_\_

Minimum Relief Valve Capacity: \_\_\_\_\_ Heat Input: \_\_\_\_\_

BTUs/LBs Input: \_\_\_\_\_

3. SAFETY APPURTENANCES MUST COMPLY WITH ASME CONTROLS AND SAFETY DEVICES CODE. (CSD-1) ATTACH TEST AND START UP CHECK LIST IF AVAILABLE.

4. BOILER ROOM:  New  Existing

Boiler room shall meet all code requirements including: proper ventilation; three (3) foot clearances on all side and top of boiler(s) and ceiling or piping for boilers with manholes. Variances must have prior approval by Chief Boiler Inspector.

Comments:

**NOTE: It is the responsibility of the installer to contact this office to schedule a final inspection prior to initial start-up of the device(s).**

**CERTIFICATION**

**My signature below shall certify that the boiler mentioned above will be installed in compliance with all state laws, rules and regulations pertaining to boiler installations, I also recognize that failure to adhere to said laws, rules and regulations may result in a fine and/or imprisonment.**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Pipefitter Master License Number: \_\_\_\_\_

Plumbing Master License Number: \_\_\_\_\_

**(Please attach a copy of Pipefitter Master License)**

**(Please attach a copy of plumbing Master License)**